

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

STATE OF DELAWARE BOARD OF PHARMACY

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711 WEBSITE: <u>DPR.DELAWARE.GOV</u> EMAIL: <u>customerservice.dpr@delaware.gov</u>

PHARMACIST-IN-CHARGE ACKNOWLEDGMENT

INSTRUCTIONS
If the Pharmacy is in Delaware:
 The Pharmacist-in-Charge (PIC) must hold a Delaware Pharmacist license. The PIC may serve as a PIC for only one pharmacy at a time. If the PIC has not previously served as a PIC in Delaware, he or she must appear personally before the Board within 90 days of assuming the position. The PIC must complete the <u>Pharmacist-in-Charge Self-Inspection</u> form within 30 days of assuming the duties of PIC and by February 1 of each year thereafter.
The Pharmacist-in-Charge must complete the acknowledgement below.
Log onto your Pharmacy's eLicensing Dashboard in <u>DELPROS</u> to upload this form.
l understand that I am responsible for conducting and managing the prescription department in compliance with all applicable state and federal laws. • Have you read and understood your responsibilities in Section 3.1 of the Board's Rules and Regulations? Yes ☐ No ☐ • Do you agree to notify the Board of Pharmacy in writing within 10 days of your termination as pharmacist-in-charge? Yes ☐ No ☐ • Are you a Delaware-licensed pharmacist? Yes ☐ No ☐ If yes, enter Delaware License A1

To receive news and alerts from the Delaware Board, a current email address is essential:

Pharmacist-in-Charge Signature:

Email: _____

- Delaware-licensed Pharmacists can log onto their eLicensing Dashboard at <u>delpros.delaware.gov</u> to update contact information.
- Non Delaware-licensed Pharmacists can log onto their pharmacy's eLicensing Dashboard at <u>delpros.delaware.gov</u> to update contact information.

UPLOAD THIS DOCUMENT WITH YOUR APPLICATION IN DELPROS